

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY

RECEI BREATH ALCOHOL PROGRAM INTOX DMT MAINTENANCE R

RECEIVED

By Carol Day at 12:49 pm, Aug 16, 2016

Omplate at 1	NCE REPORT		reach and the second
omplete this report at the time of the regular omplete this report whenever the instrument etain the original and send a copy within 15 or the control of the copy within 15 or	days to the Breath Alcoh	itenance check (not to and whenever it is place not Program, DHSS.	exceed 35 days). d into service.
500267 NAME OF AGENCY Bowling G	1		DATE OF INSPECTION 08/13/2016
5 W. Church Street, Bowling Green, M.		og spatiskin Guragaeri sov Oros	TIME OF INSPECTION 04:28:13
HECKLIST: Place a mark in the hours		sfactory or is operating v	
lues where determined). Unmarked items m DIAGNOSTIC RECORD	ust be corrected before	using instrument.	
DATE AND TIME 08/13/2016 04:28:10	6	☑ DETECTOR	
☑ PROGRAM		☑ FILTER 1	
☑ SAMPLE CHAMBER 48.7°C		☑ FILTER 2	
☑ BREATH TUBE 48.1°C		☑ FILTER 3	
⊠ PUMP		☑ INTERNAL STAN	IDARD.
REATH ANALYZER ACCURACY STANDA	ARDS		10.110
☑ SIMULATOR STANDARD		☐ COMPRESSED F	ETHANOL-GAS MIXTURE
STANDARD SUPPLIER REPCO	And the second s	15001	EXP. DATE 05/20/2017
SIMULATOR TEMP (34°C ± 0.2°C) 34.0 CALIBRATION CHECK - (ONLY ONE STRUN three tests using a standard, All three	The second secon	ATOR SN_SD3501	SIMULATOR EXPIDATE 03/15/2017
☐ 0.04% STANDARD - MUST READ EST 1: 0.098	DBETWEEN 0.038% ANTEST 2: 0.097	ND 0.042% INCLUSIVE	TEST 3: 0.097
PERFORM R.F.I. TEST			
DICATE THE NUMBER OF BREATH TES	TS IN THE FOLLOWIN	IG RANGES SINCE T	HE LAST MAINTENANCE REPORT.
FFUOALS.U [004:1	105-09:0	10 34.4	
TANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MOI ABLISHED LIMITS (USE OTHER SIDE IF NECESSARY)	DIFICATION THAT WAS MADE TO	RESTORE THE INSTRUMENT TO	OOPERATE SATISFACTORILY AND WITHIN
SPECTING OFFICER			
K()4. 4511		PRINT FULL NAME	
II PERMIT NUMBER 0166	EXPIRATION DATE	RODNEY OWEN	And a
TURN COMPLETED REPORT TO THE BI	07/23/2017	1.573.30/	2202
k a para paga a a a sa Si	outheast District Office	MO Department of Hea	alth and Senior Services
- x (0.0 (0.13)	375 James Blvd, Poplar	Bluff, MO 63901	

CERTIFICATE OF ANALYSIS

MANUFACTURER AND SUPPLIER: RepCo Marketing, Inc. LOT NUMBER: 15001 EXPIRATION DATE: May 20, 2017 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 15001 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain ______ gms/dl +/-.003 gms/dl wt/vol ethanol (95% Confidence).

The alcohol and distilled water used in the solution were found to be free of any interferring substance.

This solution will produce a vapor alcohol value of _.100_ +/-3% gms/210L Breath when heated to 34 Degrees Celsius +/-0.2 Degrees Celsius in a simulator (95% Confidence).

The date of manufacture for this lot number is May 21, 2015

The expiration date for this lot number is May 20, 2017 at 11:59 p.m.

This document is a true representation of the original Certificate of Analysis.

Cecil B. Garner, President RepCo Marketing, Inc.

Form RM 02



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



PERMIT TYPE II

RODNEY E OWEN



STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM

INSTRUMENT OPERATOR CARD

The named cardholder is authorized to operate an evidential breath alcohol Instrument for the determination of the alcoholo content in breath form of expired a. In Missouri



Operator OWEN, RODNEY

Permit No 250166 Date Issued 7/23/2015

Date Issued 7/23/2016 Date Expires 7/23/2017